

OREGON UNIFORM COMPLAINT AND COMPLAINT

Use for All Violations or Crimes Where Separate Complaint Will Not be Filed/ORS 153.045 or 133.069

☐ CRIME(S) (see A below) ☐ OR (Not Both) ☒ VIOLATION(S) (see B below) Type **OTHER**

STATE OF OREGON
COUNTY OF **JOSEPHINE**
Case No. **2019-44647**
Court **JOSEPHINE CO CIRCUIT COURT**

DEFENDANT The undersigned certifies and says that the following person

ID Type **OR** ID No **5946762** State **OR** Ph
Name Last **BLAKE** First **DEBRA** MI **LEE**
Address
City State Zip Passenger ☐
Sex **F** Race **WHT** DOB **01/30/1959** Hgt **5'02"** Wgt **170** Hair **GRY**
Eyes **BRO** Lic Exp **2012** Juv. ☐ Lic Class **c** Emp.to Drive ☐

TIME/PLACE
At the following time and place in the above-mentioned state and county

On or About Date/Time **09/11/2019 07:25 AM**
At or Near **RIVERSIDE PARK**

GRANTS PASS
NB. ☐ SB ☐ EB ☐ WB ☐
Highway ☐ Premise Open to Public ☒ Other ☐

VEHICLE Involving the following

Year Make Model
Color Type
Regis/Vin/ID# State
Accident: ☐ Prop. Damage. ☐ Injury ☐ Endanger Other ☐
Com'l Veh ☐ Haz Mat ☐ Driver Not Reg. Owner ☐
Other Com'l Pass ☐

OFFENSE(S) Did then and there commit the following offense(s)

HWY Work Zone ☐ School Zone ☐ VBR ☐ Safety Corridor ☐
Radar ☐ Pace ☐ Laser ☐ Other ☐
Alleged Speed Designated Speed. Posted Limit. ☐

Offense # **6.46.090**

CAMPING IN PARKS

Warning ☐

Presumptive Fine1 **\$295.00**

Intentional ☐ Knowing ☐ Reckless ☒
Criminal Negligence No Culpable Mental State ☒

Offense # **6.46.040**

PROHIBITED CONDUCT

Warning ☐

Presumptive Fine2 **\$295.00**

Intentional ☐ Knowing ☐ Reckless ☒
Criminal Negligence No Culpable Mental State ☒

Offense #

Warning ☐

Presumptive Fine3

Intentional ☐ Knowing ☐ Reckless ☐
Criminal Negligence No Culpable Mental State ☐

OTHER

Expl

SIGNATURE

I certify under ORS 153.045 and 153.990 and under other applicable law and under penalties for false swearing, do swear/affirm that I have sufficient grounds to and do believe that the above-mentioned defendant/person committed the above offense(s) and I have served the defendant/person with this complaint

Signature of Officer

Officer name1. **MCGINNIS, JASON.**

Officer ID **54243**

Officer name2.

Officer ID

Agency Name **GRANTS PASS DPS**

Issue Date **10/11/2019**

YOUR COURT APPEARANCE DATE, TIME AND LOCATION ARE

10/09/2019 09:00 AM
Location **JOSEPHINE CO CIRCUIT COURT**
500 NW 6TH STREET
GRANTS PASS OR 97526
541-476-2309

COMPLAINTS/SUMMONS
MD04291

Reserved for D.A. Use

Reserved for Court Use

RECORD AND: ☐ CIRCUIT COURT REGISTER ☐ JUSTICE COURT DOCKET
☐ MUNICIPAL COURT DOCKET

HANDLED BY: ☐ VIOLATIONS BUREAU ☐ COURT
☐ WRITTEN SUBMISSION ☐ APPEARANCE

DATE **EVENT/NOTES** **INITIAL**

COMPLAINT FILED	SEP 13 2019	
WRITTEN RESPONSE RECEIVED		
ARRAIGNED <input type="checkbox"/> MISD. <input type="checkbox"/> 161 566 OR <input type="checkbox"/> VIOL <input type="checkbox"/> 161 568 (REDUCTION)		
SECURITY RELEASE AT \$	RECEIPT NO	
COURT/JURY TRIAL	(<input type="checkbox"/> WAIVED)	
CRIMINAL RIGHTS GIVEN		
ATTORNEY	OSB# (<input type="checkbox"/> WAIVED)	
WARRANT ORDERED	ISSUED	
DIVERSION AGREEMENT		
CONTINUED TO	REASON	
<input type="checkbox"/> ORS 135 355 CONDITIONAL PLEA		

THE ATTACHED ADDITIONS TO THIS RECORD/REGISTER ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____).

JUDGMENT OF THE COURT (SUBMIT ABSTRACT COPY UNDER ORS 153.11)

OFF #	RESPONSE/ PLEA	CHANGE PLEA	FINDING	DETERMINATION	OFFENSE SITE	TYPE	CLASS
1	G NG NC FTA		G NG	C A DISM		VM	A B C D OTH
2	G NG NC FTA		G NG	C A DISM		VM	A B C D OTH
3	G NG NC FTA		G NG	C A DISM		VM	A B C D OTH

DISPOSITION ☐ 137 533 DEFERRED SENTENCE ☐ SENT IMP SUS

☐ DR PRIV. SUSP (TIME) CONV SPD

JAIL

PROBATION/OTHER

THE ATTACHED ADDITIONS TO THIS JUDGMENT ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____), ☐ 3 (BY _____).

MONEY JUDGMENT OFFENSE 1 OFFENSE 2 OFFENSE 3
MONEY OBLIGATION IMPOSE SUSPEND IMPOSE SUSPEND IMPOSE SUSPEND

FINE					
COSTS					
RESTITUTION					
TOTAL					

TOTAL AMOUNT TO PAY THAT IS NOT SUSPENDED (FROM OFFENSES 1, 2 AND 3) \$

TERMS OF PAYMENT

☐ ALL MONEYS, INCLUDING SUSPENDED MONEYS, BECOME DUE IMMEDIATELY UNDER ORS 153.090(4) IF NONSUSPENDED MONEYS NOT PAID IN ACCORDANCE WITH TERMS OF PAYMENT

THE ATTACHED ADDITIONS TO THIS MONEY JUDGMENT ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____).

JUDGMENT CREDITOR ☐ STATE OF OREGON ☐ OTHER

JUDGMENT DEBTOR ☐ DEFENDANT ☐ OTHER

DATE SIGNATURE OF ☐ JUDGE (☐ VIOLATIONS CLERK, WHERE ALLOWED)

Use for All Violations or Crimes Where Separate Complaint Will Not be Filed/ORS 153.045 or 133.069

☐ CRIME(S) (see A below) ☐ OR (Not Both) ☒ VIOLATION(S) (see B below) Type OTHER

STATE OF OREGON

CITY/OTHER PUBLIC BODY **GRANTS PASS**COUNTY OF **JOSEPHINE**Case No. **2019-44647**Court **JOSEPHINE CO CIRCUIT COURT****DEFENDANT** The undersigned certifies and says that the following personID Type ID No **5946762** State **OR** PhName Last **BLAKE**First **DEBRA**MI **LEE**

Address

City State Zip Passenger ☐Sex **F** Race **WHT** DOB **01/30/1959** Hgt **5'02"** Wgt **170** Hair **GRY**Eyes **BLU** Lic Exp. **2012** Juv ☐ Lic. Class **C** Emp. to Drive ☐**TIME/PLACE**

At the following time and place in the above-mentioned state and county

On or About Date/Time **09/11/2019** **11:01 AM**

At or Near City

RIVERSIDE PARK**GRANTS PASS**NB ☐ SB ☐ EB ☐ WB ☐Highway ☒ Premise Open to Public ☐ Other ☐**VEHICLE** Involving the following

Year Make Model

Color Type

Regis/Vin/ID# State

Accident ☐ Prop. Damage ☐ Injury ☐ Endanger Other ☐Com'l Veh ☐ Haz Mat ☐ Driver Not Reg Owner ☐Other Com'l Pass. ☐**OFFENSE(S)** Did then and there commit the following offense(s)HWY Work Zone ☐ School Zone ☐ VBR ☐ Safety Corridor ☐Radar ☐ Pace ☐ Laser ☐ Other ☐Alleged Speed Designated Speed. Posted Limit ☐Offense # **5.57.020****CRIMINAL TRESPASS ON CITY PROPERTY**Warning ☐Presumptive Fine1 **\$295.00**Intentional ☐ Knowing ☒ Reckless ☐Criminal Negligence ☐ No Culpable Mental State ☐

Offense #

Warning ☐

Presumptive Fine2

Intentional ☐ Knowing ☐ Reckless ☐Criminal Negligence ☐ No Culpable Mental State ☐

Offense #

Warning ☐

Presumptive Fine3

Intentional ☐ Knowing ☐ Reckless ☐Criminal Negligence ☐ No Culpable Mental State ☐

Offense #

OTHER

NEW CITE FOR TRESPASS INSTEAD OF PROHIBITED CONDUCT ON PREV CITE Expl

SIGNATURE

I certify under ORS 153.045 and 153.990 and under other applicable law and under penalties for false swearing, do swear/affirm that I have sufficient grounds to and do believe that the above-mentioned defendant/person committed the above offense(s) and I have served the defendant/person with this complaint

Signature of Officer

Officer name1 **MCGINNIS, JASON.**Officer ID **54243**

Officer name2

Officer ID

Agency Name **GRANTS PASS DPS**Issue Date **09/11/2019****YOUR COURT APPEARANCE DATE, TIME AND LOCATION ARE****10/23/2019 09:00 AM**Location **JOSEPHINE CO CIRCUIT COURT****500 NW 6TH STREET****GRANTS PASS****OR 97526****541-476-2309**

DMV Use Only

19VI151448

MD04317

RECORD AND: ☐ CIRCUIT COURT REGISTER ☐ JUSTICE COURT DOCKET
☐ MUNICIPAL COURT DOCKETHANDLED BY: ☐ VIOLATIONS BUREAU ☐ COURTBASED ON: ☐ WRITTEN SUBMISSION ☐ APPEARANCE

DATE EVENT/NOTES INITIAL

COMPLAINT FILED	SEP 27 2019	
WRITTEN RESPONSE RECEIVED		
ARRAIGNED <input type="checkbox"/> MISD <input type="checkbox"/> 161 566 OR <input type="checkbox"/> VIOL <input type="checkbox"/> 161 568 (REDUCTION)		
SECURITY RELEASE AT \$ RECEIPT NO		
COURT/JURY TRIAL (<input type="checkbox"/> WAIVED)		
CRIMINAL RIGHTS GIVEN		
ATTORNEY OSB# (<input type="checkbox"/> WAIVED)		
WARRANT ORDERED ISSUED		
DIVERSION AGREEMENT		
CONTINUED TO REASON		
<input type="checkbox"/> ORS 135 355 CONDITIONAL PLEA		

THE ATTACHED ADDITIONS TO THIS RECORD/REGISTER ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____),**JUDGMENT OF THE COURT** (SUBMIT ABSTRACT COPY UNDER ORS 153.11)

#	PLEA	CHANGE PLEA	FINDING	DETERMINATION	OFFENSE SITE	TYPE	CLASS
1	G NG NC FTA		G NG	C A DISM		VM	A B C D OTH
2	G NG NC FTA		G NG	C A DISM		VM	A B C D OTH
3	G NG NC FTA		G NG	C A DISM		VM	A B C D OTH

DISPOSITION ☐ 137 533 DEFERRED SENTENCE ☐ SENT IMP SUS☐ DR PRIV SUSP (TIME) CONV SPD

JAIL

PROBATION/OTHER

THE ATTACHED ADDITIONS TO THIS JUDGMENT ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____), ☐ 3 (BY _____),MONEY JUDGMENT OFFENSE 1 OFFENSE 2 OFFENSE 3
MONEY OBLIGATION IMPOSE SUSPEND IMPOSE SUSPEND IMPOSE SUSPEND

FINE					
COSTS					
RESTITUTION					
TOTAL					

TOTAL AMOUNT TO PAY THAT IS NOT SUSPENDED (FROM OFFENSES 1, 2 AND 3) \$

TERMS OF PAYMENT

☐ ALL MONEYS, INCLUDING SUSPENDED MONEYS, BECOME DUE IMMEDIATELY UNDER ORS 153.090(4) IF NONSUSPENDED MONEYS NOT PAID IN ACCORDANCE WITH TERMS OF PAYMENTTHE ATTACHED ADDITIONS TO THIS MONEY JUDGMENT ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____),JUDGMENT CREDITOR ☐ STATE OF OREGON ☐ OTHERJUDGMENT DEBTOR ☐ DEFENDANT ☐ OTHERDATE SIGNATURE OF ☐ JUDGE (☐ VIOLATIONS CLERK, WHERE ALLOWED)

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF JOSEPHINE
500 NW 6th Street Dept 17 Grants Pass Oregon 97526

State of Oregon

v.

Case No: 19VI143832

DEBRA LEE BLAKE

Defendant

GENERAL JUDGMENT

Re: Citation #: MD04291

The court finds the defendant GUILTY of the charges designated "CONVICTED" in the section below

Driver's License# & State: OR-5946762		Commercial DL? No	
License Name: BLAKE, DEBRA LEE			
Date of Birth: 01/30/1959	Height: 5 Ft. 2 In.	Def is Passenger? No	
Sex: Female	Weight: 170 Lbs.		
Address: 125 Manzanita Grants Pass, OR 97526			
Offense Date: 09/11/2019			
EMP: No	CMV: No	Com'l Pass Veh: No	HAZ: No
Location: Riverside Park		Time:	
ORS/OAR#:			
6.46.090	Convicted - Failure to Appear	Camping in City Park	Violation Unclassified
6.46.040		Prohibited Conduct in a City Park	Violation Unclassified
Convicted - Failure to Appear			
Convicted Speed:	Designated Speed:	In School Zone?	
		No; No	
Original Date to Appear: 10/09/2019			

FINE ASSESSED: \$590.00

Go to www.courts.oregon.gov/ePay to pay online☐ includes restitution of \$ payable to: (name, address:)

Judgment Creditor: State of Oregon

Judgment Debtor: Defendant

Payment in full is due IMMEDIATELY. If payment is not received within 30 days of this judgment, additional costs and fees will be added and your driver's license may be suspended.

10/16/2019

Date

/eS/ Christine Purkey

Violations Clerk

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF JOSEPHINE
500 NW 6th Street Dept 17 Grants Pass Oregon 97526

State of Oregon

v.

Case No: 19VI151448

DEBRA LEE BLAKE

Defendant

GENERAL JUDGMENT

Re: Citation #: MD04317

The court finds the defendant GUILTY of the charges designated "CONVICTED" in the section below

Driver's License# & State: OR-5946762		Commercial DL? No	
License Name: BLAKE, DEBRA LEE			
Date of Birth: 01/30/1959	Height: 5 Ft. 2 In.	Def is Passenger? No	
Sex: Female	Weight: 170 Lbs.		
Address: 125 Manzanita Grants Pass, OR 97526			
Offense Date: 09/11/2019			
EMP: No	CMV: No	Com'l Pass Veh: No	HAZ: No
Location: Riverside Park		Time:	
ORS/OAR#:			
5.57.020	Convicted - Failure to Appear	Criminal Trespass on City Property	Violation Unclassified
Convicted Speed:	Designated Speed:	In School Zone?	
		No	
Original Date to Appear: 10/23/2019			

FINE ASSESSED: \$295.00

Go to www.courts.oregon.gov/ePay to pay online

☐ includes restitution of \$ payable to: (name, address:)
Judgment Creditor: State of Oregon **Judgment Debtor:** Defendant

Payment in full is due **IMMEDIATELY**. If payment is not received within 30 days of this judgment, additional costs and fees will be added and your driver's license may be suspended.

10/29/2019

Date

/s/ Christine Purkey

Violations Clerk

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REGISTER OF ACTIONS

CASE No. 19VI151448

State of Oregon vs DEBRA LEE BLAKE

\$
\$
\$
\$
\$

Case Type: **Offense Violation**
 Date Filed: **09/27/2019**
 Location: **Josephine**

PARTY INFORMATION

			Attorneys
Defendant	BLAKE, DEBRA LEE 125 Manzanita Grants Pass, OR 97526 SID: OR21061030	Female White DOB: 1959 5' 2", 170 lbs	
Plaintiff	State of Oregon		

CHARGE INFORMATION

Charges: BLAKE, DEBRA LEE	Statute	Level	Date
1. Criminal Trespass on City Property	5.57.020	Violation Unclassified	09/11/2019

EVENTS & ORDERS OF THE COURT

DISPOSITIONS				
10/29/2019	Disposition (Judicial Officer: Authority, Administrative) 1. Criminal Trespass on City Property Convicted - Failure to Appear Created: 10/29/2019 3:10 PM			
10/29/2019	Sentence - Violation (Judicial Officer: Authority, Administrative) 1. Criminal Trespass on City Property Fee Totals:			
		Amount	Reduction	Owed
	Fine - Grants Pass	\$295.00		\$295.00
	Municipal Law			
	Fee Totals \$	\$295.00		\$295.00
	Fee Modifier			
	Created: 10/29/2019 3:10 PM			
OTHER EVENTS AND HEARINGS				
09/27/2019	Citation Created: 09/27/2019 9:35 AM			
10/29/2019	Judgment - Violation General (Judicial Officer: Authority, Administrative) Signed: 10/29/2019 Created: 10/29/2019 3:22 PM			
10/29/2019	Closed Created: 10/29/2019 3:23 PM			
11/05/2019	Notice FTA Created: 11/05/2019 8:04 AM			
12/03/2019	Judgment - Payment Schedule Assessment Created: 12/03/2019 7:37 AM			
12/05/2019	Recordation - Collection Referral Judgment Created: 12/05/2019 5:30 PM			

FINANCIAL INFORMATION

Defendant BLAKE, DEBRA LEE		
	Total Financial Assessment	537.60
	Total Payments and Credits	0.00
	Balance Due as of 01/13/2020	537.60
10/29/2019	Transaction Assessment	295.00
12/03/2019	Transaction Assessment	125.00
12/05/2019	Transaction Assessment	117.60

[Skip to Main Content](#) [Logout My Account](#) [Search Menu](#) [Search Criminal, Traffic and Parking Case Records](#) [Refine Search](#) [Back](#)
Location : All Locations [Images Help](#)**REGISTER OF ACTIONS****CASE NO. 19VI143832**

State of Oregon vs DEBRA LEE BLAKE

§
§
§
§
§Case Type: **Offense Violation**
Date Filed: **09/13/2019**
Location: **Josephine****PARTY INFORMATION**

Defendant	BLAKE, DEBRA LEE 125 Manzanita Grants Pass, OR 97526 SID: OR21061030	Female White DOB: 1959 5' 2", 170 lbs	Attorneys
Plaintiff	State of Oregon		

CHARGE INFORMATION

Charges: BLAKE, DEBRA LEE	Statute	Level	Date
1. Camping in City Park	6.46.090	Violation Unclassified	09/11/2019
2. Prohibited Conduct in a City Park	6.46.040	Violation Unclassified	09/11/2019

EVENTS & ORDERS OF THE COURT**DISPOSITIONS**

10/16/2019 **Disposition** (Judicial Officer: Authority, Administrative)
 1. Camping in City Park
 Convicted - Failure to Appear
 2. Prohibited Conduct in a City Park
 Convicted - Failure to Appear
 Created: 10/16/2019 10:16 AM

10/16/2019 **Sentence - Violation** (Judicial Officer: Authority, Administrative)
 1. Camping in City Park
 Fee Totals:

	Amount	Reduction	Owed
Fine - Grants Pass	\$295.00		\$295.00
Municipal Law			
Fee Totals \$	\$295.00		\$295.00
Fee Modifier			

Created: 10/16/2019 10:16 AM

10/16/2019 **Sentence - Violation** (Judicial Officer: Authority, Administrative)
 2. Prohibited Conduct in a City Park
 Fee Totals:

	Amount	Reduction	Owed
Fine - Grants Pass	\$295.00		\$295.00
Municipal Law			
Fee Totals \$	\$295.00		\$295.00
Fee Modifier			

Created: 10/16/2019 10:17 AM

OTHER EVENTS AND HEARINGS

09/13/2019 **Citation**
 Created: 09/13/2019 2:20 PM

10/16/2019 **Judgment - Violation General** (Judicial Officer: Authority, Administrative)
 Signed: 10/16/2019
 Created: 10/16/2019 10:18 AM

10/16/2019 **Closed**
 Created: 10/16/2019 10:18 AM

10/22/2019 **Notice**
 FTA
 Created: 10/22/2019 8:16 AM

11/20/2019 **Judgment - Payment Schedule Assessment**
 Created: 11/20/2019 7:08 AM

11/21/2019 **Recordation - Collection Referral Judgment**
 Created: 11/21/2019 5:26 PM

FINANCIAL INFORMATION

Defendant BLAKE, DEBRA LEE	
Total Financial Assessment	1,011.20
Total Payments and Credits	0.00
Balance Due as of 01/13/2020	1,011.20
10/16/2019 Transaction Assessment	295.00
10/16/2019 Transaction Assessment	295.00
11/20/2019 Transaction Assessment	200.00
11/21/2019 Transaction Assessment	221.20



Grants Pass Department of Public Safety

TRESPASS REPORT

Date: 9-11-19	Time: 0730 hrs.	Case #: 19-44647
Incident Address: 304 East Park St.		
Prior Warning: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Most recent warning date: NA	Prior warning Officer: NA
Related CAD Incidents		

ARRESTEE

Name: Last: Blake		First: Debra		MI: L	Sex: M	DOB: 1-30-59	Phone: NA
Race: Wht	Age: 60	Height: 5'2	Weight: 170	Hair: Grey	Eye: Bro	ID or DL Number/State: 5946762	
Address: Transient						Disposition:	
Reason for Contact: Camping in the park - Prohibited Conduct - Park hours							
Associates:							

Narrative on back

GRANTS PASS EXCLUSION ORDER

Date: 9-11-19 Time: 0730 hrs.

You, Debra Blake, are hereby excluded from all city parks within the City of Grants Pass, for a period of 30 days from the date of this Exclusion Order. If you are found to be on City property prior to the expiration of this Exclusion Order, you will be arrested.

You may file a written objection of this Exclusion Order with the City of Grants Pass, to the attention of the City Manager, within two business days of the date of this Exclusion Order. The written objection must state the relief sought. The City Council shall determine whether the Exclusion Order is upheld, shortened, or rescinded. The Exclusion Order shall remain in effect during the pendency of the objection.

Issuing Officer: McEminis DPSST #: 54243

Use for All Violations or Crimes Where Separate Complaint Will Not be Filed/ORS 153 045 or 133 069

☐ CRIME(S) (see A below) ☐ OR (Not Both) ☒ VIOLATION(S) (see B below) Type ☐ OTHER

STATE OF OREGON

CITY/OTHER PUBLIC BODY: **GRANTS PASS**COUNTY OF **JOSEPHINE**Case No. **2017-18300**Court: **JOSEPHINE COUNTY CIRCUIT COURT****DEFENDANT** The undersigned certifies and says that the following personID Type **NO ID PRES** ID No **4918160** State **OR** Ph **NONE**Name Last **DORRAH**First: **RONALD**MI **EDWARD BRANSON**Address **TRANSIENT**City **GRANTS PASS** State **OR** Zip **97526** Passenger ☐Sex **M** Race **W** DOB **05/13/1972** Hgt **6'00"** Wgt **180** Hair **RED**Eyes **BLU** Lic Exp ☐ Juv.: ☐ Lic. Class: **I** Emp to Drive ☐**TIME/PLACE**

At the following time and place in the above-mentioned state and county

On or About Date/Time: **04/26/2017** **05:34 AM**At or Near **208 NW 6TH ST** City**GRANTS PASS**NB. ☐ SB. ☐ EB ☐ WB ☐Highway. ☐ Premise Open to Public. ☒ Other ☐**VEHICLE** Involving the following

Year Make: Model

Color: Type.

Regis/Vin/ID# State **OR**Accident ☐ Prop. Damage ☐ Injury ☐ Endanger Other ☐Com'l Veh ☐ Haz Mat ☐ Driver Not Reg. Owner ☐Other. Com'l Pass ☐**OFFENSE(S)** Did then and there commit the following offense(s)HWY Work Zone ☐ School Zone ☐ VBR ☐ Safety Corridor ☐Radar. ☐ Pace ☐ Laser. ☐ Other ☐Alleged Speed: Designated Speed: Posted Limit. ☐Offense # **5.61.020****SLEEPING ON SIDEWALKS, STREETS, ALLEYS OR**Warning ☐ **WITHIN DOORWAYS PROHIBITED**Presumptive Fine1. **\$75.00**Intentional ☐ Knowing. ☐ Reckless ☐Criminal Negligence ☐ No Culpable Mental State ☒

Offense #:

Warning ☐

Presumptive Fine2:

Intentional ☐ Knowing. ☐ Reckless ☐Criminal Negligence ☐ No Culpable Mental State ☐

Offense #:

Warning ☐

Presumptive Fine3

Intentional ☐ Knowing ☐ Reckless ☐Criminal Negligence ☐ No Culpable Mental State ☐**OTHER**

Expl

SIGNATURE

I certify under ORS 153 045 and 153 990 and under other applicable law and under penalties for false swearing, do swear/affirm that I have sufficient grounds to and do believe that the above-mentioned defendant/person committed the above offense(s) and I have served the defendant/person with this complaint

Signature of Officer

Officer name1 **GASPERSON, GEORGE.**Officer ID: **44128**

Officer name2

Officer ID

Agency Name **GRANTS PASS DPS**Issue Date **04/26/2017****YOUR COURT APPEARANCE DATE, TIME AND LOCATION ARE****05/16/2017** **01:00 PM**Location **JOSEPHINE COUNTY CIRCUIT COURT****500 NW 6TH STREET****GRANTS PASS****OR 97526****541-476-2309**

DMV Use Only

RECORD AND: ☐ CIRCUIT COURT REGISTER ☐ JUSTICE COURT DOCKET
☐ MUNICIPAL COURT DOCKETHANDLED BY: ☐ VIOLATIONS BUREAU ☐ COURT
BASED ON: ☐ WRITTEN SUBMISSION ☐ APPEARANCE

DATE EVENT/NOTES INITIAL

COMPLAINT FILED **APR 28 2017**

WRITTEN RESPONSE RECEIVED

ARRAIGNED ☐ MISD ☐ 161 566 OR
☐ VIOL ☐ 161.568 (REDUCTION)

SECURITY RELEASE AT: \$ RECEIPT NO

COURT/JURY TRIAL (☐ WAIVED)

CRIMINAL RIGHTS GIVEN

ATTORNEY OSB# (☐ WAIVED)

WARRANT ORDERED ISSUED

DIVERSION AGREEMENT

CONTINUED TO REASON

☐ ORS 135 355 CONDITIONAL PLEATHE ATTACHED ADDITIONS TO THIS RECORD/REGISTER ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____),**JUDGMENT OF THE COURT** (SUBMIT ABSTRACT COPY UNDER ORS 153 11)

OFF RESPONSE/ CHANGE FINDING DETERMINATION OFFENSE TYPE CLASS

#	PLEA	PLEA	SITE	TYPE	CLASS
1	G NG NC FTA	G NG	C A DISM	VM	A B C D OTH
2	G NG NC FTA	G NG	C A DISM	VM	A B C D OTH
3	G NG NC FTA	G NG	C A DISM	VM	A B C D OTH

DISPOSITION ☐ 137 533 DEFERRED SENTENCE ☐ SENT IMP. SUS☐ OR PRIV SUSP (TIME) CONV SPD

JAIL

PROBATION/OTHER

THE ATTACHED ADDITIONS TO THIS JUDGMENT ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____), ☐ 3 (BY _____):MONEY JUDGMENT OFFENSE 1 OFFENSE 2 OFFENSE 3
MONEY OBLIGATION IMPOSE SUSPEND IMPOSE SUSPEND IMPOSE SUSPEND

FINE					
COSTS					
RESTITUTION					
TOTAL					

TOTAL AMOUNT TO PAY THAT IS NOT SUSPENDED (FROM OFFENSES 1, 2 AND 3) \$

TERMS OF PAYMENT

☐ ALL MONEYS, INCLUDING SUSPENDED MONEYS, BECOME DUE IMMEDIATELY UNDER ORS 153 090(4) IF NONSUSPENDED MONEYS NOT PAID IN ACCORDANCE WITH TERMS OF PAYMENTTHE ATTACHED ADDITIONS TO THIS MONEY JUDGMENT ARE INCORPORATED BY REFERENCE, SEE PAGE(S) ☐ 1 (BY _____), ☐ 2 (BY _____)JUDGMENT CREDITOR ☐ STATE OF OREGON ☐ OTHERJUDGMENT DEBTOR ☐ DEFENDANT ☐ OTHERDATE SIGNATURE OF ☐ JUDGE (☐ VIOLATIONS CLERK, WHERE ALLOWED)

OREGON UNIFORM CITATION AND COMPLAINT

Use for All Violations or Crimes Where Separate Complaint Will Not Be Filed/ORS 153.045 or 133.069

<input type="checkbox"/> CRIME(S) (See A on Back)	OR (Not Both)	<input checked="" type="checkbox"/> VIOLATION(S) (See B on Back)	<input type="checkbox"/> Traffic <input checked="" type="checkbox"/> Other <input type="checkbox"/> Wildlife
			<input type="checkbox"/> Boating <input checked="" type="checkbox"/> Commercial Fishing

STATE OF OREGON

CITY/OTHER PUBLIC BODY Grants PassCOUNTY OF Josephine

Docket No

<input type="checkbox"/> Court	<input checked="" type="checkbox"/> Justice
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> Circuit
<input type="checkbox"/> Juvenile	<input type="checkbox"/> Tribal
<input type="checkbox"/> Community	<input type="checkbox"/> Peer

14

THE UNDERSIGNED CERTIFIES AND SAYS THAT THE FOLLOWING PERSON:							
ID Type <input checked="" type="checkbox"/> CD <input type="checkbox"/> Non-CDL	ID No <u>37200798</u>	State <u>TX</u>	License Class <u>10</u>				
Name Last <u>White</u>	First <u>LAURENCE</u>	MI <u>L</u>					
Address <u>TRANSIENT</u>			Tel No <u>NONE</u>				
City <u>TRANSIENT</u>	State <u>TX</u>	Zip Code <u>79701</u>	Def is <input type="checkbox"/> Passenger <input type="checkbox"/> Employed to drive <input checked="" type="checkbox"/> OFFENSE				
Sex <u>M</u>	Race <u>B</u>	DOB <u>3-14-85</u>	Height <u>509</u>	Weight <u>150</u>	Hair <u>BRO</u>	Eyes <u>BRO</u>	

AT THE FOLLOWING TIME AND PLACE IN THE ABOVE-MENTIONED STATE AND COUNTY:							
Offense Date on or about <u>9</u>	Month <u>10</u>	Day <u>14</u>	Year <u>2014</u>	Time <u>0445 hrs</u>	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Highway <input checked="" type="checkbox"/> Private	<input type="checkbox"/> Premises open to public
At or near Location <u>505 S 8th St</u>							

INVOLVING THE FOLLOWING:							
Type <u>Accident</u>	Regis/VIN/ID No <u>37200798</u>	State <u>TX</u>	<input type="checkbox"/> Accident <input type="checkbox"/> Injury				
Vehicle year, make, model, style, color, OR Other, describe <u>2014 Ford Focus</u>			<input type="checkbox"/> Property Damage <input type="checkbox"/> Endanger others				
Other <u>Driver not Reg Owner</u>			<input type="checkbox"/> Com Passenger Vehicle <input type="checkbox"/> Com Vehicle				

DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):							
1 Violated (cite ORS/ ORD/rule) <u>5.61.030</u>	Describe <u>CAMPING PROHIBITED</u>	Alleged Spd <u>295</u>	Designated Spd <u>295</u>	<input type="checkbox"/> Posted Limit <input type="checkbox"/> Radar <input type="checkbox"/> Pace <input type="checkbox"/> Laser			
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state			<input type="checkbox"/> Safety Corridor <input type="checkbox"/> Psld Sch Zn <input type="checkbox"/> Hwy Wk Zn	1 Presumptive Fine <u>795</u>			
2 Violated (cite ORS/ ORD/rule)			2 Presumptive Fine				
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state			3 Presumptive Fine				
3 Violated (cite ORS/ ORD/rule)			3 Presumptive Fine				
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state							

OTHER <u>14-34936</u>	Expl <u>14-34936</u>
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I certify under ORS 153.045 and 153.090 and under other applicable law and under penalties for false swearing, do swear/affirm that I have sufficient grounds to and do believe that the above-mentioned defendant/person committed the above offense(s) and I have served the defendant/person with this complaint.		Officer(s) Agency ID <u>69085</u>
Date Issued <u>9-10-14</u>	1st Officer Signature <u>LORENTZ</u>	1st Officer ID No <u>57478</u>
Print 1st Officer Name <u>LORENTZ</u>	Signature <u>LORENTZ</u>	No
2nd Officer of Arresting Person (If Not Officer)	Signature	
YOUR COURT APPEARANCE DATE		
Mo/Day/Year <u>10/6/14</u>	Time <u>1:00</u>	Location <u>Josephine</u> 500 NW 8th Grants Pass Phone 541-476-2309
<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		Phone 541-474-5186

GPP21245

COMPLAINT

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Court use

WHITE, LAURENCE L

OREGON UNIFORM CITATION AND COMPLAINT

Use for All Violations or Crimes Where Separate Complaint Will Not Be Filed/ORS 153.045 or 153.069

<input type="checkbox"/> CRIME(S) (See A on Back)	OR (Not Both)	<input checked="" type="checkbox"/> VIOLATION(S) (See B on Back)	<input type="checkbox"/> Traffic <input checked="" type="checkbox"/> Other <input type="checkbox"/> Wildlife <input type="checkbox"/> Boating <input type="checkbox"/> Commercial Fishing
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STATE OF OREGON

CITY/OTHER PUBLIC BODY Grants PassCOUNTY OF JosephineDocket No SEP-5-2017
 Court
☐ Municipal ☒ Justice
☐ Juvenile ☐ Circuit
☐ Community ☐ Tribal
☐ Peer

THE UNDERSIGNED CERTIFIES AND SAYS THAT THE FOLLOWING PERSON:

ID Type <input type="checkbox"/> CDL <input checked="" type="checkbox"/> Non-CDL	ID No <u>3420933</u>	State <u>OR</u>	License Class
Name <u>Kay</u>	First <u>Derek</u>	MI <u>E</u>	
Address <u>Transient</u>		Tel No <u>---</u>	
City <u>---</u>	State <u>---</u>	Zip Code	Def is <input type="checkbox"/> Passenger <input type="checkbox"/> Employed to drive <input checked="" type="checkbox"/> <u>Cited</u>
Sex <u>M</u>	Race <u>W</u>	DOB <u>5-29-95</u>	Height <u>510</u>
		Weight <u>150</u>	Hair <u>Bro</u>
			Eyes <u>Bro</u>

AT THE FOLLOWING TIME AND PLACE IN THE ABOVE-MENTIONED STATE AND COUNTY:							
Offense Date on or about	Month <u>9</u>	Day <u>5</u>	Year <u>17</u>	Time <u>3:40</u>	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	<input type="checkbox"/> Highway <input type="checkbox"/> Premises open to public	
At or near location <u>310 SW 6th St.</u>							

INVOLVING THE FOLLOWING:			
Type	Regis/VIN/ID No	State	<input type="checkbox"/> Accident <input type="checkbox"/> Injury <input type="checkbox"/> Property Damage <input type="checkbox"/> Endanger others
Vehicle year, make, model, style, color, OR Other, describe			
Other			
<input type="checkbox"/> Driver not Reg Owner <input type="checkbox"/> Haz Matel <input type="checkbox"/> Com Passenger Vehicle <input type="checkbox"/> Com Vehicle			

DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):			
1 Violated (cite ORS/ ORD/rule)	Describe	Alleged Spd	Designated Spd
<u>5.61.020</u>	<u>sleeping on sidewalk</u>		
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input checked="" type="checkbox"/> No culpable mental state		<input type="checkbox"/> Safety Corridor <input type="checkbox"/> Pstd Sch Zn <input type="checkbox"/> Hwy Wk Zn	<input type="checkbox"/> Posted Limit <input type="checkbox"/> Radar <input type="checkbox"/> Pace <input type="checkbox"/> Laser 1 Presumptive Fine <u>75-</u>
2 Violated (cite ORS/ ORD/rule)	Describe		
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state			2 Presumptive Fine
3 Violated (cite ORS/ ORD/rule)	Describe		
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state			3 Presumptive Fine
OTHER <u>17-42423</u>		Expl	

I certify under ORS 153.045 and 153.990 and under other applicable law and under penalties for false swearing, do swear/affirm that I have sufficient grounds to and do believe that the above-mentioned defendant/person committed the above offense(s) and I have served the defendant/person with this complaint		Officer(s) Agency ID <u>CPDRB</u>
Date Issued <u>9-5-17</u>	1st Officer Signature <u>Ther F...</u>	1st Officer ID No <u>48145</u>
Print 1st Officer Name <u>H. Frownfelter</u>		2nd Officer ID No
2nd Officer of Arresting Person (If Not Officer)	Signature	Print Name
YOUR COURT APPEARANCE DATE, TIME AND LOCATION ARE		
Mo/Day/Year <u>9-25-17</u>	Time <u>1:00</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	<input checked="" type="checkbox"/> Josephine CO Courthouse 500 NW 6th Street Grants Pass, OR 97526 Phone 541-478-2309 <input type="checkbox"/> Juvenile Justice Center 301 NW "F" Street Grants Pass, OR 97526 Phone 541-474-5186

 COMPLAINT
 GPP23986
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